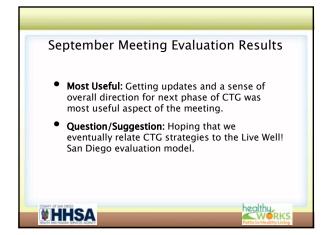
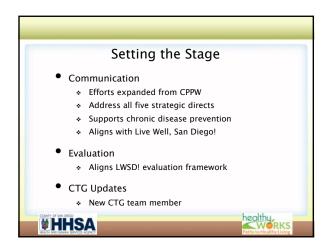
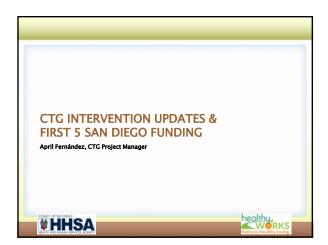


Follow-up on Action Items From September 2012 Meeting Summary: Provide information on CTG website regarding the process of procurement Explain rationale for contract disposition, when awarded CTG staff communicating with Leadership Team members

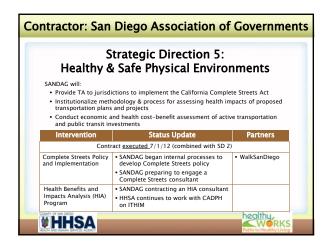
September Meeting Evaluation Results 50% response rate (6/12) What was good • Learned more about CTG SANDAG efforts and County's procurement process (100%) • Updates on CTG interventions What could be improved • More discussion time • More effective group discussions



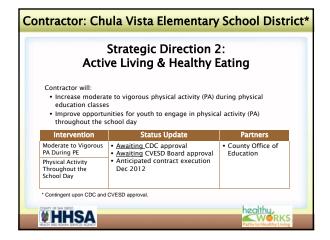


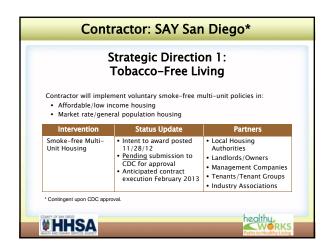




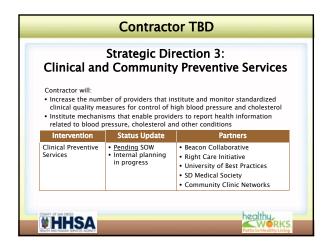




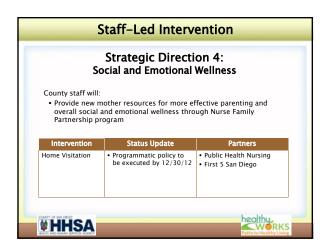








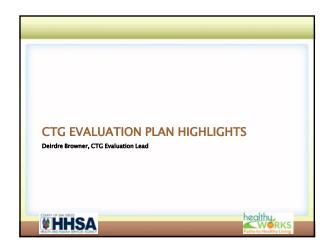




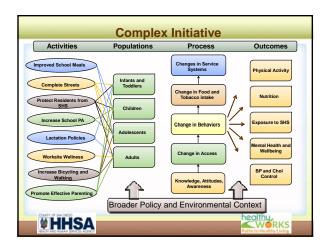


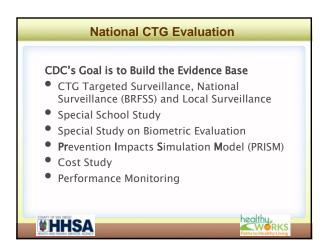
Type of Contractor	Strategic Direction	CTG Intervention	Status/Estimated Date of Execution
Sole Source: San Diego Association of Governments (SANDAG)	SD 2: Active Living and Healthy Eating	Regional Safe Routes to School (SRTS) Plan Implementation Public Health & Wellness Policies Regional Monitoring and Evaluation	Executed July 2012
	SD 5: Healthy & Safe Physical Environments	Complete Streets Policy and Implementation Health Benefits and Impacts Analysis (HIA) Program	Executed July 2012
Sole Source: San Diego Unified School District	SD 2: Active Living & Healthy Eating	 Improving Nutritional Quality of School Meals 	Executed September 2012
Sole Source: Chula Vista Elementary School District	SD 2: Active Living & Healthy Living	 Increasing Physical Activity in Schools 	December 2012
Competitive: SAY San Diego	SD 1: Tobacco-free Living	Smoke-free Multi-unit Housing	February 2013
Competitive: TBD	SD 2: Active Living & Healthy Living	Farm-to-Institution Urban/Rural Agriculture	Spring 2013
Competitive: TBD	SD 3: Clinical and Community Preventive Services	Clinical Preventive Services	Spring 2013
Competitive: TBD	SD 3: Clinical and Community Preventive Services	Worksite Wellness Lactation Supportive Environments- through First 5 San Diego funding	Spring 2013
HHSA-Led	SD 4: Social and Emotional Wellness	Home Visitation	December 2012
HHSA-Led	SD 1,2,3,4,5	Strategic Directions	Ongoing





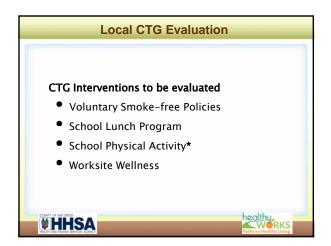
CTG Evaluation Design CTG has a multifaceted evaluation design which includes both national and local components and a background assessment of key health indicators. The evaluation is designed to both measure the impact of CTG in a standardized way across the grantees and to highlight new and innovative work taking place in many communities.

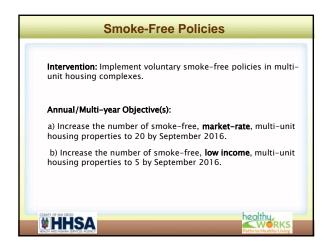


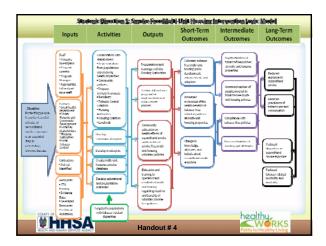


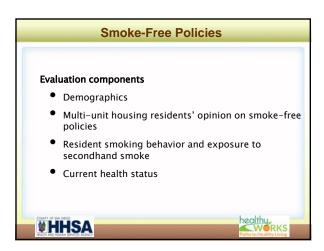
Community Required Evaluation Activities • 5 Core Measures • Community-level evaluation of select interventions • Dissemination Plan • Participation in national evaluation

CDC requires communities to measure changes in five standardized indicators at three points in time Changes in Weight Changes in Tobacco use prevalence Changes in Nutrition Changes in Physical Activity Changes in Social and Emotional Wellness



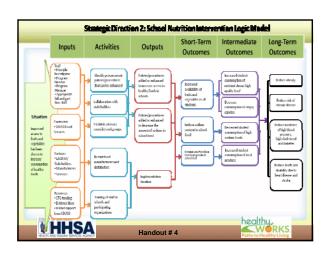






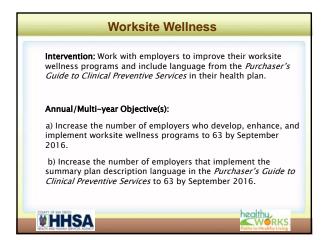
Evaluation Tools Pre and post-implementation survey Distribute according to defined sampling plan Translated into 2-3 languages Oversample among low-income MUH complexes (1,000 surveys) Assess policies with MUH operators

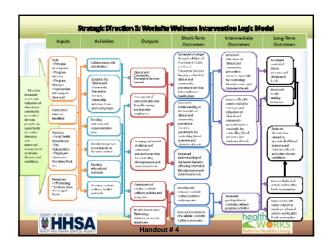
Intervention: Improve the nutritional quality of school food by reducing sodium and increasing fruits and vegetables. *Annual/Multi-year Objective(s): a) Increase the amount and availability of healthy fruits and vegetables in school meals at a large local school district by 10% by October 2015. b) Decrease the amount of sodium in school meals in a large local school district by 5% in school meals. *Recently modified as per CDC.



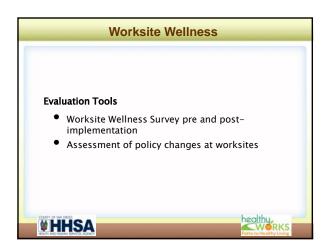
Evaluation Components Procurement changes Nutritional changes Student satisfaction with new menus Dietary assessment (specific to sodium)

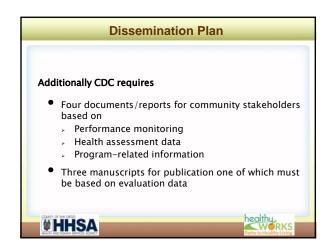
Evaluation Tools SDUSD Food Services procurement data SDUSD Nutritional analysis Student satisfaction survey Dietary recall in year 4–5



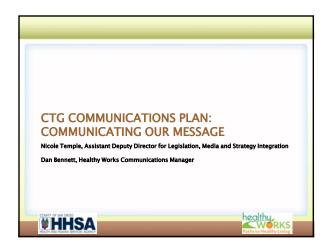


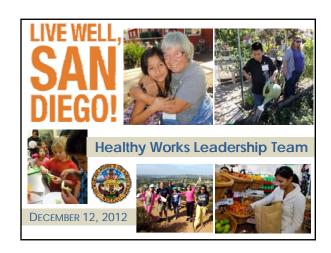
Worksite Wellness Evaluation Components Demographics Health-related behavior General health status, mental health and specific conditions Use of preventive care Employee perceptions of worksite wellness programs

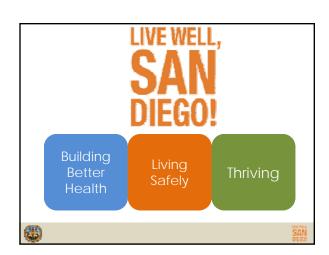


























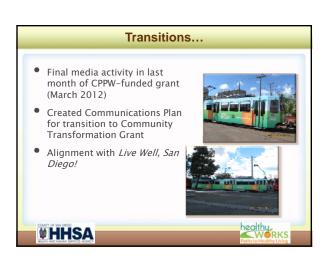






Outcomes: Feb 2011 – Mar 2012 Total campaign impressions: 109,821,766 More than 21,000 visitors to the web site Visitors spending an average of 2:16 minutes viewing content Significant increases during paid media campaigns Local news, Google and Facebook referred the most traffic

WHHSA

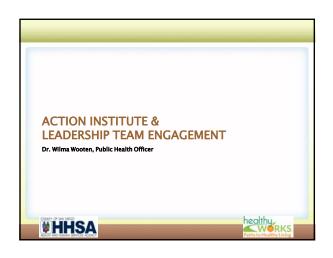












Each LT member assigned 1-2 CTG program liaisons who will: Invite members to serve on topic-specific advisory committees Tap into your expertise upon contract execution Seek your assistance in areas identified via surveys and refining discussions



Farm-to-Institution Advisory Committee Community Food Production Advisory Council SANDAG Public Health Stakeholder Workgroup (SANDAG committee; open to public) Community and Clinical Preventive Services Leadership Advisory Team Worksite Wellness Advisory Committee Lactation Supportive Environments Communications Advisory Committee

Date to be determined (tentative March 2013) Agenda that facilitates action planning Build stronger sense of being a team Learn more about CTG efforts Identify and plan for leveraging members' strengths and spheres of influence

